

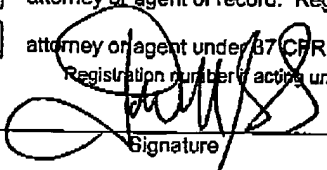
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PTO/SB/22 (10-08)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 58908(71699)	
Application Number 10/507,466-Conf. #1259		Filed September 10, 2004	
For MOLECULAR SWITCHES AND METHODS FOR MAKING AND USING THE SAME			
Art Unit 1832		Examiner S. L. Chen	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	Fee \$130	Small Entity Fee \$65 \$
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$490	\$245 \$
<input checked="" type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1110	\$555 \$ 555.00
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1730	\$865 \$
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2350	\$1175 \$
<input checked="" type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27.		
<input type="checkbox"/>	A check in the amount of the fee is enclosed.		
<input type="checkbox"/>	Payment by credit card. Form PTO-2038 is attached.		
<input checked="" type="checkbox"/>	The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/>	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>04-1105</u> .		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the	<input type="checkbox"/>	applicant/inventor.	
	<input type="checkbox"/>	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).	
	<input checked="" type="checkbox"/>	attorney or agent of record. Registration Number <u>53,624</u>	
	<input type="checkbox"/>	attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 <u></u>	
Signature 		November 21, 2008 Date	
Jonathan M. Sparks, Ph.D. Typed or printed name		(617) 517-5543 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/>	Total of <u>1</u> forms are submitted.		

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